

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>175277</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  <b>01/15/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>BRANDON WOODS AT ALVAMAR</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1501 INVERNESS DR LAWRENCE, KS 66047</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
S 000	INITIAL COMMENTS  The following citations represent the findings of a Health Resurvey and Complaint Investigation #80008 and #79179.	S 000			
S 970 SS=D	26-40-302 (g)(i)(ii)(iii) P E - Nursing facility support systems  (G) If a nursing facility uses a wireless system to meet the requirements of paragraphs  (i)(1)(A) through (E), all of the following additional requirements shall be met:  (i) The nursing facility shall be equipped with a system that records activated calls.  (ii) A signal unanswered for a designated period of time, but not more than every three minutes, shall repeat and also be sent to another workstation or to staff that were not designated to receive the original call.  (iii) Each wireless system shall utilize radio frequencies that do not interfere with or disrupt pacemakers, defibrillators, and any other medical equipment and that receive only signals initiated from the manufacturer ' s system.  This Requirement is not met as evidenced by: K.A.R. 26-40-302 (g) (i) (ii) (iii)  The facility had a census of 28 residents residing on the north unit of the facility. Based upon observation, and interview the facility failed to ensure a signal unanswered for not more than every three minutes was sent to another workstation or to staff that were not designated to receive the original call.	S 970			

If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S 970	<p>Continued From Page 1</p> <p>Findings included:</p> <ul style="list-style-type: none"> <li>- On 1/8/15 at 9:00 A.M. during Stage 1 of the facility observation revealed the unit had a wireless call system. Administrative nursing staff F stated direct care staff and the nurse unit manager carried a beeper alerting staff when residents activated his/her call light. He/she stated the Certified Medication Aide nor the nurse carried a beeper. Administrative nursing staff F stated the initial signal went to the direct care staff beeper and if the signal was unanswered for 7 minutes he/she received an alert the signal was unanswered. Licensed nursing staff (the charge nurse) M stated he/she did not carry a beeper.</li> </ul> <p>On 1/8/15 at 9:00 A.M. a direct care staff assisted the surveyor with checking the functioning of the call lights on the north unit. Observation revealed the signal activated the direct care staff beeper, the monitor at the nursing staff and the call panels located at the end of the 3 halls.</p> <p>On 1/8/15 at approximately 9:16 A.M. the surveyor activated a call light and observation revealed the signal went to the direct staff member beeper, the all panel at the end of the halls and on the monitor. Further observation revealed the signal was not answered for 3 minutes and was not sent to the unit manager beeper until 9:22 A.M. (duration of 6 minutes after the signal was activated).</p> <p>The facility failed to ensure a call light/signal unanswered for not more than every 3 minutes was sent to another workstation or to staff not designated to receive the original call.</p>	S 970			

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S 974	Continued From Page 2	S 974			
S 974 SS=E	<p>26-40-302 (2)(a)(i)(ii)(iii) P E - Door monitoring system</p> <p>(2) Door monitoring system. The nursing facility shall have an electrical monitoring system on each door that exits the nursing facility and is available to residents. The monitoring system shall alert staff when the door has been opened by a resident who should not leave the nursing facility unless accompanied by staff or other responsible person.</p> <p>(A) Each door to the following areas that is available to residents shall be electronically monitored:</p> <p>(i) The exterior of the nursing facility, including enclosed outdoor areas;</p> <p>(ii) interior doors of the nursing facility that open into another type of adult care home if the exit doors from that adult care home are not monitored; and</p> <p>(iii) any area of the building that is not licensed as an adult care home.</p> <p>This Requirement is not met as evidenced by: K.A.R. 26-40-32 (a) (i) (ii) (iii)</p> <p>The facility had a census of 100 residents. The facility had a main entrance front door for the special care and south units. Based upon observation and interview the facility failed to ensure the main entrance front door for the special care and south units had an electrical monitoring system.</p> <p>Findings included:</p>	S 974			

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S 974	<p>Continued From Page 3</p> <p>- During the initial tour of the facility on 1/7/15 at approximately 9:30 A.M. observation revealed a staff visually monitored the main entrance of the facility. Further observation revealed the front door had a wanderguard monitoring device (device used to alert staff if residents at risk for elopement attempted to leave the facility without staff knowledge).</p> <p>On 1/12/15 at 8:00 A.M. and 8:05 A.M. observation revealed no staff visually monitored the front door of the main entrance. Further observation no alarm alerted staff when the door opened.</p> <p>On 1/13/15 at 7:05 A.M. observation revealed no staff visually monitored the front door of the main entrance. Further observation no alarm alerted staff when the door opened.</p> <p>On 1/13/15 at approximately 4:00 P.M. maintenance staff X stated the front door of the main entrance of the facility did not have an alarm. He/she stated the door had a wanderguard monitoring device which alerted staff if residents with wanderguards opened/exited the front door. Maintenance staff X stated the door automatically locked at 8:00 P.M. and automatically unlocked at 7:00 A.M. He/she stated staff visually monitored the door during normal business hours. Maintenance staff X stated if residents without a wanderguard device exited the front door when it was not visually monitored no alarm alerted staff residents had opened the door and/or exited the facility.</p> <p>The facility failed to ensure all exit doors had an electrical monitoring system.</p>	S 974			

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